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APPLICANTS

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** CONTINUING DATA *****

 ** FOREIGN APPLICATIONS *****
none BA
none BH

 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Signature <i>BA</i> Initials				

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TITLE

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